## STATEMENT OF

FORM 1		ORC	GANIZA	ATIC	N		Offi	ce Use Only	
NAME OF COMMITTEE (in	n full)		k if name anged)		ple:If typing, typ the lines.		Ĕ4M5		
CONNECT	ŗļĊŲŢ	HORSE	E ASSC	)ÇIA	TION		<u> </u>	1111	
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ADDRESS (number a	nd street)	1504 S	. Hous	ton S	Street		1 1 1 1	1 1 1 1	
(Check if address is changed)		Kaufma	an			\\ <b>\</b> \	( 75	142	لبيا
			1	CITY		STATE	i	ZIP CO	DE
COMMITTEE'S E-MA	address				ress) n@gmail,	.com		111	
COMMITTEE'S WEB  (Check if is change	address		cticutho	rsea	ssociatio	n.tumb	olr.com		 
2. DATE 10	<b>)"</b> ] ′ <b>9</b>	° 2012							
3. FEC IDENTIFIC	CATION NU	JMBER	C 00	)526	871				
4. IS THIS STATE	MENT _	NEW (N)	OR	$\boxtimes$	AMENDED (	A)			
I certify that I have	examined th	is Statement ar	nd to the best	of my ki	nowledge and be	lief it is true,	correct and	complete.	
Type or Print Name	of Treasure	Julie (	Carama	ante					
Signature of Treasur	er <u> </u>	Julie	Cara	mo	inti	_ Date	10" '	<b>09</b> ° ′	2012 `
NOTE: Submission of				_	ect the person sig			penalties of 2	U.S.C. §437g.
Office Use					For further Informa Federal Election Cor Toll Free 800-424-95	nmission		FEC FOF	

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5. TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate infor	rmation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign coinformation below.)	emmittee. (Complete the candidate
Name of Candidate	
Candidate Office Sought: House Senate	State President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized	committee.
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization or	n line 6.) Its connected organization is a
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registraot PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT committee. (i.e., nonconnected committee)	a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	)
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, at least one of which is an authorized committee of a fode	•
(h) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, none of which is an authorized committee of a federal car	proceeds for two or more political ndidate.
Committees Participating in Joint Fundraiser	
1. [ ]   FEC ID numb	ber C
2. FEC ID numb	ber C
3.	ber C
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Write or Type Committee Name		
CONNECTICUT	HORSE ASSOCIATION	
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Lead	dership PAC Sponsor
<u>none                                      </u>	1111111111	111111
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
<ol> <li>Custodian of Records: Iden books and records.</li> </ol>	tify by name, address (phone number optional) and position of the person in	possession of committee
Full Name Paula	Bacon	
Mailing Address	1504 S. Houston Street	
		<del>                                      </del>
	Kaufman TX 75	142   -   -   -   -   -   -   -   -   -
Title or Position	CITY STATE	ZIP CODE
Custodian of Rec	ords Telephone number [972]	- [824   - [1073
Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name of Treasurer	Caramante	
Mailing Address	1504 S. Houston Street	
	Kaufman TX 75	142
Title or Position Treasurer	Telephone number [281] —	. <u> 766  </u>

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		-	
Full Name of Designated Agent	Paula	Bacon , , , , , , , , , , , , , , , , , , ,	1 1 1 1 1 1 1 1 1 1
Mailing Address		1504 S. Houston Street	
		Kaufman	751 <u>42</u>
		CITY STATE	ZIP CODE
Title or Position    Assistant	reasurer	Telephone number	24-1073] —
Banks or Othe safety deposit b Name of Bank,	oxes or main Depository, o	etc.	funds, holds accounts, rents
safety deposit by Name of Bank,	Depository,	ntains funds. etc. rgan Chase Bank	funds, holds accounts, rents
safety deposit b	Depository,	ntains funds. etc.	funds, holds accounts, rents
safety deposit by Name of Bank,	Depository,	ntains funds. etc. rgan Chase Bank	funds, holds accounts, rents
safety deposit by Name of Bank,	Depository,	ntains funds. etc.  rgan Chase Bank  811 Preston Road	
safety deposit by Name of Bank,	JPMOI	rgan Chase Bank  811 Preston Road  Dallas  CITY  STATE	[75225]
safety deposit by Name of Bank, Mailing Address	JPMOI	rgan Chase Bank  811 Preston Road  Dallas  CITY  STATE	[75225]
safety deposit by Name of Bank, Mailing Address  Name of Bank,	Depository,	rgan Chase Bank  811 Preston Road  Dallas  CITY  STATE	[75225]
safety deposit by Name of Bank, Mailing Address	Depository,	rgan Chase Bank  811 Preston Road  Dallas  CITY  STATE	75225
safety deposit by Name of Bank, Mailing Address  Name of Bank,	Depository,	rgan Chase Bank  811 Preston Road  Dallas  CITY  STATE	75225
safety deposit to Name of Bank, Mailing Address	Depository,	rgan Chase Bank  811 Preston Road  Dallas  CITY  STATE	[75225]

Federal Election Commiss ENVELOPE REPLACEMENT PAGE FOR INC The FEC added this page to the end of this filing to	OMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature	e Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next	Business Day Delivery
Received from House Records & Registration Office	Date of Receipt ce
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ate of Receipt or Postmarked
PV	10/18/2012
PREPARER ( / / (3/2005)	DATE PREPARED
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